

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

X678

Based on an inspection this day, the item(s) noted below identify violations (f 410 IAC 7-24) Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name	Telephone Number	Date of Insp	pection PERMIT #
Tucker's American Favorites	812-944-9999	(mm/dd/yr)	
	⊣~ ; •	9/26	119 /274 /
2441 State St Steb New Albany, IN 471.		11 -	7 ()
Owner Toll Meyors & Dame Kosto	Purpose:	Follow-up	Release Date
Owner's Address	1. Routine		1700
2441 State St	2. Follow-up 3. Complaint	Summary o	of Violations:
D. C. C.	4. Pre-Operational	c 2	NC5R1
Person in Charge //oyd " Cody" Meyers	5. Temporary		
Responsible Person's E-mail	6. HACCP	Мепи Туре	e (See back of page)
Certified Food Manager	7. Other (list)	1 2	3 41/5
- need copy in store -		1	
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMN	NS MARKED "C"		
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"			
Section# C/NC R Narrative			To Be Corrected By
189 C R & Megsured green beer	15 dated 9-25-1	\overline{a}	today
	ce bath.		
- Review code # 190 for cooling methods.			
438 C Observed degreser spray bothe not labeled. corrected			
110 NC Observed change of owner without 10 days			
submitting accumentation to health dept.			
- Aplan review packet is required. Permits do			
not transfer with owner ship chouse.			
119 NC Observed no CFH Managers Certificate. 2 days			
-New Owner is certified but no copy is at store.			
134 NC Observed line cook with wrist watch. Corrected			
2 or back splash. Observed spots in ice muchine			
new ninge.	- / 1/4 / / / 1		Z days
			2 days
Store provide reception.			
	Tr	\	
Received by (name and title printed): Loycl Mayers & Thomas Snider, EHS			
Received by (signature): Inspected by (signature):			
cc; cc;	0/01.70	cc:	<u> </u>